Image# 14960678075 PAGE 1 / 11

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Ot	ffice Use Only	
1. NAME COMI	E OF MITTEE (in full)	TYPE OR P	RINT ▼		nple: If typ the lines.	ing, type	12FE	4M5		
Progre	essive Americ	cans for Dem	nocracy							1
ADDRESS	6 (number and stree	PO Box 20	6246							
•	Check if different									
t	han previously eported. (ACC)	Eugene					OR		97402-0464	
2. FEC	IDENTIFICATIO	N NUMBER ▼	CIT	ГҮ▲			STATE	\	ZIP CC	DDE 🛦
С	C00417493		_	S THIS REPORT		NEW (N) OR		AMEN (A)	IDED	
	E OF REPORT se One)	Repo	ort 🔲	20 (M2)		May 20 (M5)		Aug 20	(M8)	Nov 20 (M11) (Non-Election Year Only)
(a) (Quarterly Reports:	Due	Mar	20 (M3)		Jun 20 (M6)		Sep 20		Dec 20 (M12) (Non-Election Year Only)
×	April 15 Quarterly Repo	ort (Q1)		20 (M4)	Ц.	Jul 20 (M7)		Oct 20 (Jan 31 (YE)
	July 15 Quarterly Repo	ort (Q2)	12-Day PRE-Election	H	Primary (12			neral (120		Runoff (12R)
	October 15 Quarterly Repo		Report for the:	Ш	Convention	(120)	Sp.	ecial (12S))	
	January 31 Year-End Repo	ort (YE)	Election	on on	M = M /	D D /	Y	Y Y	in the State	of
	July 31 Mid-Ye Report (Non-e Year Only) (M	lection (u) Y)	30-Day POST-Election Report for the:		General (30	G)	Ru	noff (30R)		Special (30S)
	Termination Re (TER)	eport	Election	on on	M = M /	D = D /	YIYI	Y Y	in the State	of
5. Cover	ing Period	M M / D D	2014	Y	through	03	/ D 31	D / Y	2014	
_	at I have examine	•		my know	rledge and	belief it is tr	ue, corre	ct and co	omplete.	
Type or P	rint Name of Trea	Surer Don Cors	on							
Signature	of Treasurer	Don Corson		ı	[Electronical	ly Filed]	Date	M M 04	14	2014
NOTE: Sul	omission of false, e	erroneous, or inco	mplete informatio	n may sul	oject the pe	rson signing	this Repo	rt to the p	penalties of 2	U.S.C. §437g.
	Office Use Only								FEC FOF Rev. 12/2	

SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	I Page 2
Write or Type Committee Name		
Progressive Americans for Democr	racy	
Report Covering the Period: From:	1 01 2014	To: 03 / 31 / 2014
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		5853.07
(b) Cash on Hand at Beginning of Reporting Period	5853.07	
(c) Total Receipts (from Line 19)	4001.31	4001.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9854.38	9854.38
7. Total Disbursements (from Line 31)	4822.93	4822.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5031.45	5031.45
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	
This committee has qualified as a multica	ndidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Progressive America	ans for Democracy
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R	eport Covering the Period: From: 01		o: 03 / 31 / 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0	0
	(ii) Unitemized	0	0
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	0	0
	(b) Political Party Committees	0	0
	(such as PACs)(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	4000	4000
12.	Totals to Line 33, page 5) Transfers From Affiliated/Other	4000	4000
	Party Committees	0	0
	All Loans Received	0	0
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0	0
17.	to Federal Candidates and Other Political Committees Other Federal Receipts	0	0
	(Dividends, Interest, etc.)	1.31	1.31
	(from Schedule H3)	0	0
	(b) Levin Funds (from Schedule H5)	0	0
	(c) Total Transfers (add 18(a) and 18(b))	0	0
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	4001.31	4001.31
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	4001.31	4001.31

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Salonal Tour to Bute
(i) Federal Share	0	0
(ii) Non Endoral Shara	0	0
(ii) Non-Federal Share(b) Other Federal Operating		
Expenditures	2708.93	2708.93
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	2708.93	2708.93
. Transfers to Affiliated/Other Party Committees	0	0
Contributions to Federal Candidates/Committees		
and Other Political Committees	1114	1114
. Independent Expenditures	0	0
(use Schedule E)	7	7
(2 U.S.C. §441a(d)) (use Schedule F)	0	0
(
. Loan Repayments Made	0	0
Loans Made	0	0
Refunds of Contributions To:	7 7	
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds	0	0
(add Lines 28(a), (b), and (c))▶	7	
Other Disbursements	1000	1000
Fadaral Flactica Astricts (0.11.0.0, \$404(00))	, ,	
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0	0
(ii) III ovinii Chara	0	0
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely		
With Federal Funds	0	0
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4822.93	4822.93
Total Fodoral Dishuraamanta		
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	4822.93	4822.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4000	4000
1. Total Contribution Refunds (from Line 28(d))	0	0
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000	4000
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2708.93	2708.93
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
3. Net Operating Expenditures (subtract Line 37 from Line 36)	2708.93	2708.93

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 11
TEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	11a 11b X 11c 12
			13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Progressive Americans for De	emocracy		
Full Name (Last, First, Middle Initial) A. Sabre Holdings Corp. Political Action	on Committee		Date of Receipt
Mailing Address 1250 Connecticut Avenue Suite 825	NW		03 03 2014
City	State	Zip Code	Transaction ID : 184-706-c
Washington	DC	20036-2617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C cod	0325811	2500
Name of Employer	Occupation		
Receipt For:	Angregate	Year-to-Date ▼	
Primary General	Aggregate	Total to Date ¥	
Other (specify) ▼	L	2500	
Full Name (Last, First, Middle Initial) 3. Expedia Inc Political Action Comr	nittee		Date of Receipt
Mailing Address 333 108th Avenue NE			M = M / D = D / Y = Y = Y
			03 14 2014
City	State	Zip Code	Transaction ID: 185-707-c
Bellevue	WA	98004-5703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C coo	0462879	1500
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	1 33. 53		1
Other (specify) ▼		1500	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			1
Other (specify) ▼		7 7	
SUBTOTAL of Receipts This Page (optional)			4000.00
The second of th			
TOTAL This Period (last nage this line numb	er only)		4000.00

TOTAL This Period (last page this line number only).....

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	7	OF 11
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	one)				
			Summary Page	X 21b 27	22	23	24	25 29	26
_	.,	<u> </u>			28a	28b	28c		30b
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full)		3 h = 200						
	Progressive Americans for Democr	acy							
_	Full Name (Last, First, Middle Initial)								
Α.					M = M	f Disburse	D / Y	Y	Υ
	Mailing Address 3635 Ruffin Road				01	0	2	2014	_
	Floor 3 City	State	Zip Code						
	San Diego	CA	92123-1880		Trans	action ID	: SB21B-21	І-683-е	
	Purpose of Disbursement computer expense			004	A		Diahamaana	م: ملد خمر	Daviad
	Candidate Name			001	Amoun	OI Each	Disburseme	ent trus	Period
	Canadate Hane			Category/ Type					200
	Office Sought: House Disbursen	nent For:							
		Primary	General						
	State: District:	Other (spec	city) 🔻						
_									
В.	Full Name (Last, First, Middle Initial) Complete Campaigns				Date of	Disburse	ement		
					M = M	/ D	D / Y	Y	Υ
	Mailing Address 3635 Ruffin Road Floor 3				02	0	3	2014	
	•	State CA	Zip Code 92123-1880		Trans	action ID	: SB21B-2	1-691-e	
	Purpose of Disbursement		32123 1000						
	computer expense			001	Amount	of Each	Disburseme	ent this	Period
	Candidate Name			Category/					200
	Office Sought: House Disbursen	nent For:		Туре		,	,		
		Primary	General						
		Other (spec							
	State: District:		·						
_	Full Name (Last, First, Middle Initial)								
C.	NGP VAN, Inc.				Date of	Disburse	D D / Y Y Y		
	Mailing Address 1101 15th Street NW				02				Y
	Suite 500				UZ			2014	_
	City	State	Zip Code		Trans	action ID	: SB21B-19	32-696-4	<u> </u>
		DC	20005-5006		Halls			000-0	-
	Purpose of Disbursement computer expense			001			5		
	Candidate Name			Category/	Amoun	of Each	Disburseme	ent this	
				Type					300
	Office Sought: House Disbursen								
		Primary Other (spec	General						
	State: District:	Other (spec	Jiiy) ▼						
	Siotrot.								
5	SUBTOTAL of Disbursements This Page (optional)			·····				700	0.00
Γ,	OTAL This Period (last page this line number only)								
1 '	VIAL THIS I CHOU (last page this line number only)					-	7		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 8 OF 11
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only		
	for each category of the Detailed Summary Page	X 21b	22 23	24 25 26
		27	28a 28b	28c 29 30b
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full)				
Progressive Americans for Demo	cracy			
Full Name (Last, First, Middle Initial)				
Complete Campaigns			Date of Disburseme	ent
Mailing Address 3635 Ruffin Road Floor 3			03 03	2014
City	State Zip Code		Transaction ID : S	P24P 24 600 a
San Diego	CA 92123-1880		Transaction iD: 3	DD21D-21-099-E
Purpose of Disbursement computer expense		001	Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		200
Office Sought: House Disbur	sement For:		,	,
Senate	Primary General			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
3. NGP VAN, Inc.			Date of Disburseme	
Mailing Address 1101 15th Street NW Suite 500			03 03	2014
City Washington	State Zip Code DC 20005-5006		Transaction ID : S	SB21B-182-700-e
Purpose of Disbursement computer expense		001	Amount of Each Dis	sbursement this Period
Candidate Name		Category/ Type		500
Office Sought: House Disburs	sement For:	.,,,,,	,	,
Senate President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) - JW Marriott			Date of Disburseme	ent
			M M / D D	/
Mailing Address 3800 W Starr Pass Boulevard			01 31	2014
City Tucson	State Zip Code AZ 85745-5115		Transaction ID : S	SB21B-186-5-V
Purpose of Disbursement Travel: reimbursement for travel		002	Assessment of Feeth Di	alauma ann amh Mais Barda d
Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period 591.4
Office Sought: House Disbur	sement For:	.,,,,,	[MEMO ITEM]	
Senate	Primary General			ter DeFazio (03/13/14)
President	Other (specify) ▼			. ,
State: District:				
SUBTOTAL of Disbursements This Page (optional)	·····	7	700.00
TOTAL This Period (last page this line number or	ıly)	·····•	7	7

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER	:	PAG	E 9	OF 11
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	one)				
			Summary Page	X 21b 27	22 28a	23 28b		25 29	26 30b
۸.	ny information copied from such Reports and Statem	ante mou r	not he sold or us						
or	for commercial purposes, other than using the nam	e and addr	ess of any politic	al committee to	solicit co	ntributions	s from such	commi	ttee.
\setminus	NAME OF COMMITTEE (In Full)								
	Progressive Americans for Democr	acy							
_	Full Name (Last, First, Middle Initial)					, D			
A.	Peter DeFazio								
	Mailing Address PO Box 1316				03			2014	Y
	City	State	Zip Code		-		. CD04D 4	20 740	_
	Sp.i.ig.isia	OR	97477-0152		Irans	saction ID	: 5B21B-1	ას-/13-	е
	Purpose of Disbursement Travel: reimbursement for travel			002	Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/				-	
				Type		7	-	5	91.4
	Office Sought: House Disbursem								
		Primary	General						
	State: District:	Other (spec	Jily) ▼						
_	Full Name (Last, First, Middle Initial)						ment SB21B-130-7 Disbursement t ment SB21B-130-7 Disbursement t ment 201 SB21B-130-7 Disbursement t		
В.	Peter DeFazio				Date o	f Disburse	ement		
					M = M	/ D	D / Y	YY	■ Y
	Mailing Address PO Box 1316				03		13	2014	
	,	State OR	Zip Code 97477-0152		Trans	saction ID) : SB21B-1	30-714-	е
	Purpose of Disbursement								
	Travel: reimbursement for travel			002	Amoun	t of Each	Disbursem	ent this	Period
	Candidate Name			Category/ Type		,		18	32.06
	Office Sought: House Disbursen	nent For:							
		Primary	General						
	President State: District:	Other (spec	city) 🔻						
_	Full Name (Last, First, Middle Initial)								
C.	Peter DeFazio				Date o	f Disburse	1		
					M M	/ D	pose of soliciting contribution butions from such committee such c	Y	
	Mailing Address PO Box 1316				03	2			
	,	State	Zip Code		Trans	saction In		e	
	Springfield Purpose of Disbursement	OR	97477-0152		lians			50 / 10-	_
	reimbursement for a fund raising event expense			001	A 100 0 1 1 1 1	+ of F!	Dieburre	-!حلفاده	Dovic -
	Candidate Name		Category/	Amoun	i oi ⊨ach	DISDURSEM			
	Office Sought: House Disbursen	nent For:		Туре					
		Primary	General						
		Other (spec							
	State: District:								
Г	•						se of soliciting contributions from such committed in soliciting contributions from such committed in soliciting soliciting contributions from such committed in soliciting soli		
5	SUBTOTAL of Disbursements This Page (optional)					-		4.42	
T.								226	4.42
1	'OTAL This Period (last page this line number only).			••••••		-		220	

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 10 OF 11
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30l
Anninformation conicd from such December and Chabon				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Progressive Americans for Democra	acy			
Full Name (Last, First, Middle Initial)				
^{A.} US Airways			Date of Disburser	
Mailing Address 4000 E Sky Harbor Boulevard			01 30	
City	tate Zip Code		Transaction ID	CD22 472 4 V
	AZ 85034-3802		Transaction iD	. 3D23-173-4-V
Purpose of Disbursement travel in support of Ron Barbers re-elect		011	Amount of Each I	Disbursement this Period
Candidate Name		Category/		1114
Ronald Barber Office Sought: House Disbursem	ent For: 2014	Туре		
Senate X	Primary General Other (specify) ▼		[MEMO ITEM] Subitemization of I	Peter DeFazio (03/13/14)
State: AZ District: 02				
Full Name (Last, First, Middle Initial)				
B. Peter DeFazio			Date of Disburser	
Mailing Address PO Box 1316			03 13	3 2014
Springfield	tate Zip Code OR 97477-0152		Transaction ID	: SB23-130-712-e
Purpose of Disbursement travel in support of Ron Barbers re-elect		011	Amount of Each I	Disbursement this Period
Candidate Name		Category/		4444
Ronald Barber		Type		1114
Senate X	ent For: 2014 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
D.			Date of Disburser	ment
			M M / D	D / Y Y Y Y Y
Mailing Address				
City	tate Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each I	Disbursement this Period
Office Sought: House Disbursem	ent For:		7	
	Primary General			
	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				1114.00
GODICIAL OF DISDUISEMENTS THIS Page (optional)		······	7	7
TOTAL This Period (last page this line number only).				1114.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 1	1 OF 11
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b	one) 22 23 24 2	25 26
		27		29 30
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
Progressive Americans for Democ	racy			
Full Name (Last, First, Middle Initial)				
A. Friends Of Pat Malone			Date of Disbursement	Y
Mailing Address PO Box 2649			03 14 201	4
City S Corvallis	State Zip Code OR 97339-2901		Transaction ID : SB29-183-705	5-е
Purpose of Disbursement	97339-2901			
Political Contribution: contribution		011	Amount of Each Disbursement to	his Period
Candidate Name		Category/ Type		1000
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial) 3.			Data of Dishuraamant	
			Date of Disbursement	Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement			Amount of Each Disbursement tl	his Period
Candidate Name		Category/ Type		
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)			
State: District: Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each Disbursement the	nis Period
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)	Турс		
State: District:				
SUBTOTAL of Disbursements This Page (optional)			1	000.00
TOTAL This Period (last page this line number only)	1		1	00.00
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